

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.  | DATE   |
|---------------------------|----------|---------|--------|
| FEE DETERMINATION         |          |         |        |
| O.I.P.E. CLASSIFIER       |          |         |        |
| FORMALITY REVIEW          |          |         |        |
| RESPONSE FORMALITY REVIEW |          |         |        |
|                           | SA       | 63-4-66 | C-30-0 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim          | Date    |
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| Final Original |         |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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